

UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i>		Attorney Docket No. 240366US2	
		First Inventor or Application Identifier Moo Ho BAE	
		Title DIGITAL RECEIVE-FOCUSING APPARATUS USING ANALOGUE MULTIPLEXERS	
		Assignee Name: Medison Co., Ltd.	
		Assignee Address: 114 Yangdukwon-ri, Nam-myun, Hongchun-gun, Kangwon-do 250-870, Republic of Korea	

APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents</i>		ADDRESS TO: Commissioner for Patents Mail Stop Patent Application Alexandria, Virginia 22313	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i>		ACCOMPANYING APPLICATION PARTS	
2. <input checked="" type="checkbox"/> Specification Total Sheets 9		7. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))	
3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) Total Sheets 1		8. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	
4. <input checked="" type="checkbox"/> Oath or Declaration Total Pages 3		9. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement □ Power of Attorney <i>(when there is an assignee)</i>	
a. <input checked="" type="checkbox"/> Newly executed (original)		10. <input type="checkbox"/> English Translation Document <i>(if applicable)</i>	
b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. §1.63(d)) <i>(for continuation/divisional with box 17 completed)</i>		11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 □ Copies of IDS Citations	
i. <input type="checkbox"/> DELETION OF INVENTOR(S) <i>Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §1.63(d)(2) and 1.33(b).</i>		12. <input type="checkbox"/> Preliminary Amendment	
5. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)		13. <input checked="" type="checkbox"/> White Advance Serial No. Postcard	
6. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i>		14. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s) (1) <i>(if foreign priority is claimed)</i>	
a. <input type="checkbox"/> Computer Readable Form (CRF)		15. <input checked="" type="checkbox"/> Applicant claims small entity status. <i>See 37 CFR 1.27</i>	
b. Specification or Sequence Listing on :		16. <input checked="" type="checkbox"/> Other: Request for Priority	
i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or			
ii. <input type="checkbox"/> Paper			
c. <input type="checkbox"/> Statements verifying identity of above copies			
17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application no.:			
Prior application information: Examiner: Group Art Unit:			
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.			
18. Amend the specification by inserting before the first line the sentence: <input type="checkbox"/> This application is a <input type="checkbox"/> Continuation <input type="checkbox"/> Division <input type="checkbox"/> Continuation-in-part (CIP) of application Serial No. Filed on			
<input type="checkbox"/> This application claims priority of provisional application Serial No. Filed			
19. CORRESPONDENCE ADDRESS			
 22850 (703) 413-3000 FACSIMILE: (703) 413-2220			

Name:	Marvin J. Spivak	Registration No.:	24,913
Signature:	<i>Marvin J. Spivak</i>		Date: 7/16/03
Name:	C. Irvin McClelland	Registration No.:	
Registration Number 21,124			

07/16/03



Docket No. 240366US2

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) Moo Ho BAE

SERIAL NO: New Application

FILING DATE: Herewith

FOR: DIGITAL RECEIVE-FOCUSING APPARATUS USING ANALOGUE MULTIPLEXERS

FEE TRANSMITTAL

COMMISSIONER FOR PATENTS
ALEXANDRIA, VIRGINIA 22313

FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL CLAIMS	5 - 20 =	0	x \$18 =	\$0.00
INDEPENDENT CLAIMS	1 - 3 =	0	x \$84 =	\$0.00
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS (If applicable)			+ \$280 =	\$0.00
<input type="checkbox"/> LATE FILING OF DECLARATION			+ \$130 =	\$0.00
			BASIC FEE	\$750.00
			TOTAL OF ABOVE CALCULATIONS	\$750.00
<input checked="" type="checkbox"/> REDUCTION BY 50% FOR FILING BY SMALL ENTITY				(\$375.00)
<input type="checkbox"/> FILING IN NON-ENGLISH LANGUAGE			+ \$130 =	\$0.00
<input checked="" type="checkbox"/> RECORDATION OF ASSIGNMENT			+ \$40 =	\$40.00
			TOTAL	\$415.00

Please charge Deposit Account No. 15-0030 in the amount of **\$0.00** A duplicate copy of this sheet is enclosed.

A check in the amount of **\$415.00** to cover the filing fee is enclosed.

The Director is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check is enclosed herewith, or credit any overpayment to Deposit Account No. 15-0030. A duplicate copy of this sheet is enclosed.

Respectfully Submitted,

OBLOON, SPIVAK, McCLELLAND,
MAIER & NEUSTADT, P.C.

Marvin J. Spivak

Registration No. 24,913

C. Irvin McClelland
Registration Number 21,124Date: 7/16/03

22850

Tel. (703) 413-3000
Fax. (703) 413-2220
(OSMMN 05/03)